## PART B-ISSUE FEE TRANSMITTAL Comple together with appli **Box ISSUE FEE Assistant Commissioner for Patents** Washington, D.C. 20231 This form should be used for transmitting the ISSUE FEE. Blocks 1 MAILING INSTRU through 4 should be completed where appropriate. All further correspondence including the Issue Fee Note: The certificate of mailing below can only be used for domestic mailings of the Issue Fee Transmittal. This certificate cannot be used Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing. specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Certificate of Mailing CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1) I hereby certify that this issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class HM22/0702 mail in an envelope addressed to the Box Issue Fee address above on KEVIN M FARRELL the date indicated below. P 0 B0X 999 YORK HARBOR ME 03911 Moulton (Depositor's name) (Signature) (Date) APPLICATION NO. **FILING DATE TOTAL CLAIMS** EXAMINER AND GROUP ART UNIT DATE MAILED 09/026,276 02/19/98 017 HAMUD, F 1647 07/02/d First Named KENTEN, 35 USC 154(b) term ext. **Applicant** 0 Days. UBIQUITIN FUSION-BASED VACCINE SYSTEM TITLE OF INVENTION 10/01/2001 HTECKLU2 00000184 09026276 01 FC:142 1240.00 BP 45.00 DP 02 FC:561 ATTY'S DOCKET NO. **CLASS-SUBCLASS** BATCH NO. APPLN, TYPE SMALL ENTITY FEE DUE DATE DUE 1 IGN-9601 424-192.100 163 UTILITY NO \$1240.00 10/02/01 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Use of PTO form(s) and Customer Number are recommended, but not required. (1) the names of up to 3 registered patent Kevin M. Parrell attorneys or agents OR, alternatively, (2) ☐ Change of correspondence address (or Change of Correspondence Address form the name of a single firm (having as a PTO/SB/122) attached. member a registered attorney or agent) and the names of up to 2 registered patent ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached. attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) 4a. The following fees are enclosed (make check payable to Commissioner PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. of Patents and Trademarks): Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitue for Issue Fee filing an assignment. K Advance Order - # of Copies. 15 (A) NAME OF ASSIGNEE Proteinix Company 4b. The following fees or deficiency in these fees should be charged to: DEPOSIT ACCOUNT AN INDEED 06-0130RESIDENCE (CITY & STATE OH COUNTRY) Gaithersburg, Maryland DEPOSIT ACCOUNT NUMBER (ENCLOSE AN EXTRA COPY OF THIS FORM) Please check the appropriate assignee category indicated below (will not be printed on the patent) Issue Fee ☐ Individual $\hat{\mathbb{D}}$ corporation or other private group entity $\square$ government □ Advance Order - # of Copies\_ The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above. (Authorized Signature (Date) NOTE; The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, Patent and Trademark RECEIVED Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND FEES AND THIS FORM TO: Box Issue Fee, Assistant Commissioner for JUL 0 5 2001 Patents, Washington D.C. 20231

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